

St. Andrew Lutheran Church

Share Volunteers



Volunteer Application

Name: _____ Date: _____

Date of Birth: _____ Gender: Male Female

Address: _____ Home Phone: _____

City, State, Zip: _____ Cell Phone: _____

Email: _____ Occupation: _____

Emergency Contact: _____ Employer Contact: _____

Relationship: _____ Work Hours/days: _____

Phone: _____ Works Phone: _____

• For your safety, should we be aware of any medical conditions?

- Would you like to receive our newsletter? Yes No If 'Yes', would you like it sent via: E-mail Postal Mail
- Are you a student needing to complete community service hours for school or other programs? Yes No
- If yes, how many hours? _____ By what date? _____ Will you need these hours verified? Yes No

Volunteer Preferences:

Please check a box for your preferred area to volunteer.

You may check more than one box.

- Meal Preparation
- Backpack Program
- Children's activities
- Childcare
- Share Outreach
- Office/Clerical Support
- Bulk Mailing Assistance
- Donation Room
- Donation Drivers
- Building/facility Maintenance
- Serving on the board of directors
- Fund Development Committee
- Community Relations Committee
- Short Term Special Events (holidays)
- Donation Drives
- Legal Advocate
- Medical Aid (Physicians or nurses)
- Group Facilitator
- Translator; Language:
- Mentoring Experiences
- Other:

Availability:

Please check box for days & circle times you are available.

(This does not commit you to all of these times; it just shows availability.)

- Sundays: morning / afternoon / evening
- Mondays: morning / afternoon / evening
- Tuesdays: morning / afternoon / evening
- Wednesdays: morning / afternoon / evening
- Thursdays: morning / afternoon / evening
- Fridays: morning / afternoon / evening
- Saturdays: morning / afternoon / evening

How did you find out about our volunteer program?

Special skills, hobbies or interests?

What is your primary reason for volunteering?

Have you ever been convicted of a crime? Yes No

If yes, what and when: _____

- I certify that all statements made by me on this application are true and correct to the best of my knowledge and that I have withheld nothing that would, if disclosed, affect this application unfavorably. I understand and agree that any misrepresentations or omission of facts can exclude my being considered for volunteer services or after my service begins may be cause for termination
- I understand that my involvement as a volunteer is contingent upon a clean criminal background check
- I will perform services as a volunteer without compensation, and in performing such services I acknowledge that I am not acting as an employee of Share
- I understand that I may have access to, or work with information considered confidential regarding clients, employees, and volunteers. Confidential information includes, but is not limited to: names, addresses, phone numbers, circumstances (past, present or future) and all other information considered "personal or private" and thus confidential. I agree to hold all such information in complete confidence both during and following my volunteer period with Share.
- I understand that my participation is strictly on a volunteer basis and that there will be no insurance provided against bodily harm. I also understand that volunteer positions are not covered under Worker's Compensation Insurance. I agree to hold harmless entity known as share from liability for any and all bodily injury, sickness or property loss/damage sustained while serving as a volunteer.

As a Share volunteer we would like you to know that Share has a boundary policy in place to protect both volunteers and clients. We ask that you do not engage in conversations regarding race, religion or politics. Please do not encourage friendships, offer rides or give out personal information.

Signature: _____ Today's Date: _____

Signature of Parent or Guardian (if under 18): _____